PAGE 1 / 18

Image# 201507289000433904

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

	For Other Than An	Authorized	I Committe	ee		Office Use Only	
1. NAME OF	TYPE OR PRINT ▼	Eva	mple: If typir	ng type		Office Use Offis	
COMMITTEE (in full)	711 Z 311 7 111111 V		r the lines.	ig, type	12FE4M5		
Protecting Choice in C	alifornia, a projec	t of Planne	ed Parent	hood Affi	liates of C	alifornia	
ADDRESS (number and street)	555 Capitol Mall, Suite	1425					
Check if different							
than previously reported. (ACC)	Sacramento				CA _	95814	-
2. FEC IDENTIFICATION NU	JMBER ▼	CITY		S	STATE 🛦	ZIP CO	DE 🛦
C C00556860		3. IS THIS REPORT	\ <u>/</u>	IEW N) OR	AM (A)	ENDED	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2)		May 20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On:	Mar 20 (M3)	J	lun 20 (M6)	Sep	20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15		Apr 20 (M4)	J	lul 20 (M7)	Oct 2	20 (M10)	Jan 31 (YE)
Quarterly Report (C	(c) 12-Day	П	Primary (12P)	General ((12G)	Runoff (12R)
July 15 Quarterly Report (C	PRE-Election Report for th	1 H	Convention (_	Special (, ,
October 15 Quarterly Report (C	23)				4		
January 31 Year-End Report (Y	′E)E	lection on	M = M /	D D 7	Y 1 Y 1 Y 1 Y	in the State o	of
July 31 Mid-Year Report (Non-electio Year Only) (MY)	n (d) 30-Day POST-Electi Report for the		General (30G	i)	Runoff (3	0R)	Special (30S)
Termination Report (TER)		lection on	M = M /	D D /	Y	in the State o	of _
5. Covering Period 01	M / D D / Y Y	015	through	M M 06	/ 30 /	2015	
I certify that I have examined th	is Report and to the be	st of my knov	wledge and b	elief it is true	e, correct and	l complete.	
Type or Print Name of Treasure	r Kathy Kneer						
Signature of Treasurer Kath	y Kneer		[Electronically	Filed] Da	ate 07	/ D D / 24_	2015
NOTE: Submission of false, errone	eous, or incomplete inforr	nation may su	bject the pers	son signing th	is Report to th	ne penalties of 2	U.S.C. §437g.
Office						FEC FOR	
Use Only						Rev. 12/2	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

Protecting Choice in California, a project of Planned Parenthood Affiliates of California

2015 06 30 2015 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 8292.40 January 1, 2015 (b) Cash on Hand at 8292.40 Beginning of Reporting Period..... 33483.27 33483.27 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 41775.67 41775.67 6(a) and 6(c) for Column B)..... 2523.36 2523.36 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 39252.31 39252.31 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Protecting Choice in California, a project of Planned Parenthood Affiliates of California

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
<u> </u>	Total Trils Period	Calendar fear-to-Date
. Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	0.00	0.00
(i) itemized (use schedule A)		
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add	0.00	
Lines 11(a)(i) and (ii)	0.00	0.00
Lines Tr(a)(i) and (ii)	0.00	
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	32497.00	32497.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	32497.00	32497.00
2. Transfers From Affiliated/Other	7	
Party Committees	0.00	0.00
,		
B. All Loans Received	0.00	0.00
Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures	7	7
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	986.27	986.27
6. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds	3.00	
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
,	7	4
(b) Levin Funds (from Schedule H5)	0.00	0.00
(b) Levill Fullus (IIoIII Schedule Fis)		7
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(c) Total Hallslets (add To(a) and To(b))	0.00	0.00
O. Total Receipts (add Lines 11(d), 10(1)		00 400 07
12, 13, 14, 15, 16, 17, and 18(c))▶	33483.27	33483.27
). Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	33483.27	33483.27

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating		
	Expenditures	773.36	773.36
	(c) Total Operating Expenditures	773.36	773.36
22.	(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	110.00	113.30
	Committees	0.00	0.00
23.	Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
24.	Independent Expenditures	500.00	500.00
25.	(use Schedule E)	500.00	500.00
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
	(255 551104415 1 /	7 7	
26.	Loan Repayments Made	0.00	0.00
7	Loans Made	0.00	0.00
28.	Refunds of Contributions To: (a) Individuals/Persons Other	7 7 7	
	Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	0.00	0.00
	Oil Bid		4050.00
29.	Other Disbursements	1250.00	1250.00
30.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(7 - 555-5		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add		
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
}1	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	2523.36	2523.36
32.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	2523.36	2523.36

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	32497.00	32497.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	32497.00	32497.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	773.36	773.36
7. Offsets to Operating Expenditures (from Line 15, page 3)	986.27	986.27
8. Net Operating Expenditures (subtract Line 37 from Line 36)	-212.91	-212.91

S

Ima	age# 201507289000433909								
SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s				NUMBER	R: PAGE	6 OF	F 18
			Detailed Summary Page		13	14	15	16	17
Ar or	ny information copied from such Reports and S for commercial purposes, other than using the	tatements mand a	ay not be sold or used by any puddress of any political committed	erson f	for the	purpose on ntributions	of soliciting from such	contributi	ions ee.
	NAME OF COMMITTEE (In Full) Protecting Choice in California,	a project	of Planned Parenthoo	d Aff	iliate	s of Ca	alifornia		
Α.	Full Name (Last, First, Middle Initial) Planned Parenthood Action Fund of Santa	Barbara, Ve	ntura and San Luis Obispo PA	С	Date of Receipt				
	Mailing Address 518 Garden Street			02 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					Υ
	City	State	Zip Code		Trans	saction ID	: INCA692		
	Santa Barbara	CA	93101	/	Amoun	t of Each	Receipt thi	s Period	
	FEC ID number of contributing federal political committee.	ÿ				,	7	4067.	00
	Name of Employer	Occupation			-				
	Receipt For:	Aggragata	Voor to Data W						
	Primary General	Aggregate	Year-to-Date ▼	-					
	Other (specify) ▼		4067.00						
D	Full Name (Last, First, Middle Initial) Planned Parenthood Action Fund of	the Pacific	c Southwest PAC	Ι.	Doto o	f Doggint			
υ.				- '	Date of Receipt				
	Mailing Address 1075 El Camino del Rio South				02			2015	Y
	City	State	Zip Code	02 19 2015 Transaction ID : INCA698					
	San Diego	CA	92108				Receipt thi		
	FEC ID number of contributing			☐ í	unoun	t or Edon	Trocorpt till	o i dilod	-
	federal political committee.	С		7000.00				00	
	Name of Employer	Occupation							
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General	33 13		1					
	Other (specify) ▼		14780.00						
С.	Full Name (Last, First, Middle Initial) Planned Parenthood Action Fund	of the Pa	cific Southwest PAC		Date o	f Receipt			
	Mailing Address 1075 El Camino del Rio South				M = M 02	/ D 1		2015	Y
	City	State	Zip Code		Trans	saction ID	: INCA699		
	San Diego	CA	92108		Amoun	t of Each	Receipt thi	s Period	
	FEC ID number of contributing federal political committee.	С				-,	- 7	7780.	.00
	Name of Employer	Occupation	1						
	Receipt For:		V	\dashv					
	Primary General	Aggregate	Year-to-Date ▼						
Other (specify)			14780.00						

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

18847.00

SCHEDULE A (FEC F ITEMIZED RECEIPTS

Other (specify)

General

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

Occupation

Aggregate Year-to-Date ▼

Name of Employer

Primary

Receipt For:

C.

lm	age# 201507289000433910								
	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	_	NE NUMBER: only one)	PAG 11c 15	П.	OF 12	18
	ny information copied from such Reports and Si for commercial purposes, other than using the								
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Protecting Choice in California,	a project	of Planned Parenthood	d Affilia	tes of Cali	fornia	a		
۹.	Full Name (Last, First, Middle Initial) Planned Parenthood of Orange and San Berna	ardino Counti	es Community Action Fund PAC	Date	of Receipt				
	Mailing Address 555 Capitol Mall, Suite 1425			O2		/ Y	20°	15 ₌	1
	City	State	Zip Code	Tra	nsaction ID:	INCA69	3		
	Sacramento	CA	95814	Amo	unt of Each R	eceipt tl	nis Pe	eriod	
	FEC ID number of contributing federal political committee.	С				7		7000.00)
	Name of Employer	Occupation	l						
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General								
	Other (specify) \blacktriangledown		13650.00						
3.	Full Name (Last, First, Middle Initial) Planned Parenthood of Orange and San Bernardino Counties Community Action Fund PAC		Date	of Receipt					
	Mailing Address 555 Capitol Mall, Suite 1425			02		/ Y	201	5	
	City	State	Zip Code	Tra	nsaction ID : I	NCA69	4		
	Sacramento	CA	95814	Amo	unt of Each R	eceipt tl	nis Pe	riod	
	FEC ID number of contributing federal political committee.	С			7	-	6	650.00	
	Name of Employer	Occupation	1						
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General	7.99.094.0							
	Other (specify) ▼		13650.00	Ц					
Full Name (Last, First, Middle Initial)				Date	of Receipt				
	Mailing Address		М	M / D D	/ [Y	Y	YYY	1	
	City	State	Zip Code	Amo	unt of Each R	eceipt t	nis Pe	eriod	
	FEC ID number of contributing			7					
	federal political committee.	C				- 7			

13650.00 32497.00

S 17

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 8 OF 18				
	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)				
			Detailed Summary Page	11a 11b 11c 12 13 14 X 15 16 17				
	ly information copied from such Reports and Si for commercial purposes, other than using the							
	NAME OF COMMITTEE (In Full) Protecting Choice in California,	a project	of Planned Parenthoo	d Affiliates of California				
Α.	Full Name (Last, First, Middle Initial) Planned Parenthood Affiliates of Califo	ornia		Date of Receipt				
	Mailing Address 555 Capitol Mall, Suite 510			01 28 2015				
	City	State	Zip Code	Transaction ID : INCA695				
	Sacramento	CA	95814	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		311.05				
	Name of Employer	Occupation	1	Refund of overpayment				
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General	7.99.094.0		1				
	Other (specify) ▼		986.27					
_	Full Name (Last, First, Middle Initial)	l:f = ! =						
В.		illomia		Date of Receipt				
	Mailing Address 555 Capitol Mall, Suite 510			02 09 2015				
	City	State	Zip Code	Transaction ID : INCA696				
	Sacramento	CA	95814	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		600.00				
	Name of Employer	Occupation	1	Refund of overpayment				
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General Other (specify) ▼	riggrogato	986.27					
— с.	Full Name (Last, First, Middle Initial) Planned Parenthood Affiliates of C	California		Date of Receipt				
	Mailing Address 555 Capitol Mall, Suite 510			03 04 _ 2015 _				
	City	State	Zip Code	Transaction ID : INCA702				
	Sacramento	CA	95814	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		75.22				
	Name of Employer	Occupation	1	Refund of overpayment				
	Receipt For:	Receipt For:						
	Primary General	Aygregate	Year-to-Date ▼					
	Other (specify) ▼		986.27					
s	UBTOTAL of Receipts This Page (optional)			986.27				

TOTAL This Period (last page this line number only).....

986.27

17

SCHEDULE B (FEC Form 3X)	Harris I I I I I I I I I I I I I I I I I I I	FOR LINE	NUMBER:	PAGE 9 OF 18
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only		
	Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 26 28c 29 30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan	nents may not be sold or us	sed by any pers	on for the purpose o	f soliciting contributions
NAME OF COMMITTEE (In Full)	le and address of any point	car committee to	Solicit Contributions	nom such committee.
Protecting Choice in California, a p	roject of Planned P	arenthood	Affiliates of Ca	lifornia
Full Name (Last, First, Middle Initial)			Data of Diaburaar	mont
A. James Wisley			Date of Disburser	
Mailing Address 1570 Prospect Avenue			01 30	
,	State Zip Code		Transaction ID :	: EXPB691
Hermosa Beach Purpose of Disbursement	CA 90254			
Consulting for Field Program Non Federal Expense		001	Amount of Each I	Disbursement this Period
Candidate Name		Category/		750.00
Office Sought: House Disburser	nent For:	Туре		
Senate	Primary General			
President State: District:	Other (specify) ▼			
State: District: Full Name (Last, First, Middle Initial)				
B.			Date of Disburser	ment
			M = M / D =	D / Y Y Y Y
Mailing Address				
City	State Zip Code			
Purpose of Disbursement				
			Amount of Each I	Disbursement this Period
Candidate Name		Category/ Type		
Office Sought: House Disburser	nent For:	туре		
Senate	Primary General			
State: President District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C.			Date of Disburser	ment
Mailing Address			M M / D	D / Y Y Y Y
ivialing Address				
City	State Zip Code			
Purpose of Disbursement				
Candidate Name	Candidate Name			
Office Sought: House Disburser	ment For:	Туре		
Senate	Primary General			
State: President State:	Other (specify) ▼			
SUBTOTAL of Disbursements This Page (optional)		·····		750.00
TOTAL This Period (last page this line number only)				750.00
I IVIAL THIS FEHOU (IASE PAYE THIS HITE HUTTIVET ONLY)				

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SCHEDULE B (FEC Form 3X)	Han anneste estado (FOR LINE	
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 24 25 26 28a 28b 28c X 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
Protecting Choice in California, a p	roject of Planned P	arenthood A	Affiliates of California
Full Name (Last, First, Middle Initial)			Date of Disbursement
A. Emerge California			M M / D D / Y Y Y Y
Mailing Address 1624 Franklin Street, Suite 1001			06 12 2015
	State Zip Code		Transaction ID : EXPB704
Oakland Purpose of Disbursement	CA 94612		
Civic Donation Non Federal Expense		012	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Office Country House		Type	1000.00
Office Sought: House Disbursem	nent For: Primary General		
	Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial)			
³ · James Wisley			Date of Disbursement
Mailing Address 1570 Prospect Avenue			01 30 / Y Y Y Y Y Y Y
Hermosa Beach	State Zip Code CA 90254		Transaction ID : EXPB685
Purpose of Disbursement Non Monetary Donation to Planned Parenthood Act	ion Fund of the Pacific	012	Amount of Each Disbursement this Period
Candidate Name		Category/	Amount of Each Biobardoment and Ferrod
		Type	250.00
Office Sought: House Disburserr			
	Primary General Other (specify) ▼		
State: District:	Other (specify)		
Full Name (Last, First, Middle Initial)			
>.			Date of Disbursement
Mailing Address			M - M / D - D / Y - Y - Y
City	State Zip Code		
Purpose of Disbursement			
			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	
Office Sought: House Disbursem			
	Primary General		
State: District:	Other (specify) ▼		
Oldio. District.			
SUBTOTAL of Disbursements This Page (optional)			1250.00
age (optional)			
TOTAL This Period (last page this line number only).			1250.00

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 11
FOR LINE NUMBER: (check only one)

	9
X	10

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OF

NAME OF COMMITTEE (In Full) Protecting Choice in California, a project of Planned Parenthood Affiliates of California A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non Monetary Donation to Planned James Wisley Parenthood Action Fund of the Pacific Southwest (ID #C90011412) Mailing Address 1570 Prospect Avenue State Zip Code Hermosa Beach 90254 Transaction ID: PAYD593 Outstanding Balance Beginning This Period 250.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 250.00 0.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Campaign Consulting for Robocalls; 10/16 -James Wisley 10/31 Mailing Address 1570 Prospect Avenue City State Zip Code Hermosa Beach 90254 CA Outstanding Balance Beginning This Period Transaction ID: PAYD420 250.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 250.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Campaign Consulting for Canvassing James Wisley Activities; 11/1 - 11/4 Mailing Address 1570 Prospect Avenue City State Zip Code Hermosa Beach 90254 CA Transaction ID: PAYD491 Outstanding Balance Beginning This Period 83.75 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 83.75 0.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Form/Schedule: SD10 Transaction ID: PAYD420

Payment for independent expenditure disseminated in prior period

Form/Schedule: SD10 Transaction ID: PAYD491

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 13 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

18

NAME OF COMMITTEE (In Full) Protecting Choice in California, a project of Planned Parenthood Affiliates of California A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Campaign Consulting for GOTV Activities; 11/1 James Wisley - 11/4 Mailing Address 1570 Prospect Avenue State Zip Code Hermosa Beach 90254 Transaction ID: PAYD627 Outstanding Balance Beginning This Period 83.75 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 83.75 0.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Campaign Consulting for GOTV Activities; 11/1 James Wisley - 11/4 Mailing Address 1570 Prospect Avenue City State Zip Code Hermosa Beach 90254 CA Outstanding Balance Beginning This Period Transaction ID: PAYD628 82.50 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 82.50 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Payment This Period Amount Incurred This Period Outstanding Balance at Close of This Period 0.00 1) SUBTOTALS This Period This Page (optional)..... 0.00 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Form/Schedule: SD10 Transaction ID: PAYD627

Payment for independent expenditure disseminated in prior period

Form/Schedule: SD10 Transaction ID: PAYD628

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE	15	OF	18 DRM 3X
FOR L	INE 24	OF FO	DRM 3X

	FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full) Protecting Choice in California, a project of Planned Parenthood FEC IDENTIFICATION NUMBER **The committee of the committee of				
Affiliates of California	C C00556860			
Check if 24-hour report 48-hour report New report Amends report file	ed on Mam / Dab / Yayayay			
Full Name of Payee James Wisley	Date of Public Distribution/Dissemination			
	10 16 7 2014			
Mailing Address 1570 Prospect Avenue	Amount			
City State Zip Code	250.00			
Hermosa Beach CA 90254	Transaction ID : PDTE73 Date of Disbursement or Obligation			
Purpose of Expenditure Campaign Consulting for Robocalls; 10/16 - 10/31 Category/ Type 24E	01 30 / 2015			
Name of Federal Candidate Support Office	ce Sought: X House District: 24			
Lois Capps Oppose	President Senate State: CA			
Calendar Year-To-Date Per Election for Office Sought Dist 201	bursement For:			
Full Name of Payee	Date of Public Distribution/Dissemination			
James Wisley	11 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 1570 Prospect Avenue	Amount			
City State Zip Code	82.50			
Hermosa Beach CA 90254	Transaction ID : PDTE82 Date of Disbursement or Obligation			
Purpose of Expenditure Campaign Consulting for GOTV Activities; 11/1 - 11/4; No candidate exceeds \$200 Category/ Type 24E	01 30 2015			
Name of Federal Candidate Support Offi	ice Sought: House District:			
Multiple candidates Oppose	President Senate State:			
Calendar Year-To-Date Per Election for Office Sought Disi 201	bursement For: Primary General Other (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures	332.50			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not newith, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.				
Kathy Kneer [Electronically Filed] Date	07 24 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Signature				

Form/Schedule: SE Transaction ID: PDTE73

Payment for independent expenditure disseminated in prior period

Form/Schedule: SE Transaction ID: PDTE82

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE	17	OF	18
FOR	LINE 24	OF	FORM 3X

	FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full) Protecting Choice in California, a project of Planned Parenthood FEC IDENTIFICATION NUMBER ▼				
Affiliates of California	C C00556860			
Check if 24-hour report 48-hour report New report Amends report file	ed on Man / Dad / Yayayay			
Full Name of Payee James Wisley	Date of Public Distribution/Dissemination			
	11 01 7 2014			
Mailing Address 1570 Prospect Avenue	Amount			
City State Zip Code	83.75			
Hermosa Beach CA 90254	Transaction ID : PDTE83 Date of Disbursement or Obligation			
Purpose of Expenditure Campaign Consulting for GOTV Activities; 11/1 - 11/4 Category/ Type 24E	01 30 / 2015			
Name of Federal Candidate Support Off	fice Sought: X House District: 24			
Lois Capps Oppose	President Senate State: CA			
Calendar Year-To-Date Per Election for Office Sought Dis 20	sbursement For: Primary			
Full Name of Payee	Date of Public Distribution/Dissemination			
James Wisley	11 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 1570 Prospect Avenue	Amount			
City State Zip Code	83.75			
Hermosa Beach CA 90254	Transaction ID : PDTE80 Date of Disbursement or Obligation			
Purpose of Expenditure Campaign Consulting for Canvassing Activities; 11/1 - 11/4 Category/ Type 24E	01 30 / 2015			
Name of Federal Candidate Support Off	fice Sought: X House District: 26			
Julia Brownley Oppose	President Senate State: CA			
	sbursement For: Primary			
(a) SUBTOTAL of Itemized Independent Expenditures	167.50			
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7			
(c) TOTAL Independent Expenditures	500.00			
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.				
Kathy Kneer [Electronically Filed] Date	07			
Signature				

Form/Schedule: SE Transaction ID: PDTE83

Payment for independent expenditure disseminated in prior period

Form/Schedule: SE Transaction ID: PDTE80